

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

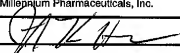
Total Number of Pages in This Submission 8

Application Number 10/074,547
Filing Date February 12, 2002
First Named Inventor Rory A.J. Curtis
Art Unit 1647
Examiner Name Hunnicutt, Rachel Kapust
Attorney Docket Number MPI01-019P1RNM

ENCLOSURES (Check all that apply)

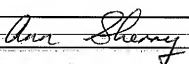
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Supplemental Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Copy of POA/Correspondence Address Indication Form (1 pg); Copy of Statement under 37 CFR 3.73(b) (1 pg); "Fee Address" Indication Form (1 pg);
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	
	Also enclosed is a Copy of Recorded Assignments (cover sheet & document(s)) (4 pgs)	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Millennium Pharmaceuticals, Inc.		
Signature			
Printed name	Jonathan K. Hamm		
Date	May 19, 2009	Reg. No.	59,608

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below:

Signature			
Typed or printed name	Ann Sherry	Date	May 19, 2009